

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>				Application Number	09/1264118
				Filing Date	03/08/99
				First Named Inventor	SORENSEN, Jens Ole
				Group Art Unit	1623
				Examiner Name	
Sheet	1	of	2	Attorney Docket Number	18-150

RECEIVED

JUN 11 1999

~~GROUP 470~~

Examiner Signature	<i>h. heard</i>	Date Considered	<i>3/2000</i>
-----------------------	-----------------	--------------------	---------------

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² See attached Kinds of U.S. Patent Documents. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box

PTO/SB/08B (10-96)
Approved for use through 10/31/99. OMB 0651-0031
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
Collection of information unless it contains a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Sheet

2

1

2

Complete if Known

Application Number	09/264,118
Filing Date	03/08/99
First Named Inventor	SORENSEN, Jens Ole
Group Art Unit	1754
Examiner Name	
Attorney Docket Number	18-150

OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
LL		Blakely, "The Good Virus", Discover, Nov. 1996, pp 50 et seq.	
LL		Hall, "Eat To Fight Cancer", Health, April 1997, pp 108 et seq.	

Examiner Signature	L. Leary	Date Considered	3/2000
-----------------------	----------	--------------------	--------

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.